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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/551,459			ing Date 30/2005	To be Mailed
APPLICATION AS FILED — PART I (Column 1) (Column 2)								SMALL ENTITY				HER THAN ALL ENTITY
FOR NUMBE				ILED NU		MBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A			N/A			N/A	
	SEARCH FEE (37 CFR 1.16(k), (i), (i)	or (m))	N/A		N/A			N/A			N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A			N/A			N/A	
	ΓAL CLAIMS CFR 1.16(i))		minus 20 =		*			x \$ =		OR	x \$ =	
IND	EPENDENT CLAIM CFR 1.16(h))	S	minus 3 =		*			x \$ =		1	x \$ =	
	APPLICATION SIZE 37 CFR 1.16(s))	she is \$ add	If the specification and dr sheets of paper, the appl is \$250 (\$125 for small e additional 50 sheets or fr 35 U.S.C. 41(a)(1)(G) an			lication size fee due entity) for each eaction thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))												
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL			TOTAL	
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY				
AMENDMENT	02/17/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	* 3	Minus	** 20		= 0		x \$ =		OR	X \$52=	0
	Independent (37 CFR 1.16(h))	* 2	Minus	***5		= 0		X \$ =		OR	X \$220=	0
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
		(Column 1)		(Colun	nn 2)	(Column 3)		•				
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	*	Minus	**		=		x \$ =		OR	x \$ =	
	Independent (37 CFR 1.16(h))	*	Minus	***		=		x \$ =		OR	x \$ =	
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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